U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



3. Name and address of person filing.

P.O. Box, Bldg., Room No., if any

L Donahou

1. File Number U-

Name Dennis

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 / 2004

Name Arkansas Regional Council Of Carpenters

4. Name, file number, and address of labor organization.

Labor Organization File Number 541 - 186

P.O. Box, Building and Room Number, if any

Street 1407 S Knoxville Ave	Street 1407 S Knoxville Ave
City Russellville	City Russellville
State Arkansas ZIP Code + 4 728	02 State Arkansas ZIP Code + 4 72802
5. Position in labor organization. Executive Secretary	- Ireasurer
Enter appropriate data below if, during the past fiscal year, yo (except as specific	u or your spouse or minor child directly or indirectly had any of the following interests ed in the exclusions set forth in the instructions):
A. Held an interest in, engaged in transactions (including loa monetary value from an employer whose employees you	ns) with, or derived income or other economic benefit of roganization represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	7.b. Amount.
Street	7.5. Allouin.
City	
State ZIP Code + 4	
	Signature
15. Signature and verification. The undersigned declares, und submitted in this report (including the information contained in ar undersigned's knowledge and belief, true, correct, and complete	ler penalty of Perjury and other applicable penalties of the law, that all of the information by accompanying documents), has been examined by the signatory and is, to the best of the e. (See the section on penalties in the instructions.)
Signed Dann Constian	On 8-1-05 479-968-1724
	Date Telephone Number

Name of Person Filing Dennis Donahou	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
Name and address of Business (including trade name, if any).	9. Business deals with:	
Name		
Trade Name, if any:	a. Labor Organization b. Trust	
P.O. Box, Bldg., Room No., if any	c. Employer	
Street	C. Employer	
City		
State ZIP Code + 4		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street	11.b. Approximate dollar value of such dealing.	
City	12.a. Nature of interest held or income received.	
State ZIP Code + 4		
	12.b. Amount.	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name See Attached	See attached	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4		
	14.b. Amount of payment.	
13.b. Is the Business an Employer or Consultant?		

## 2004 LM - 30 Attachment

13.b.

**Employer** 

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13.a.
       OBA Midwest
       1000 Burr Ridge Parkway,
              Suite 200
       Burr Ridge, IL 60527
13.b.
       Employer
14.a./b.
       Trustee Meal -1/29 - $152.40 (w/ family)
       Trustee Meal -2/3 - $158.60 (w/ family)
       Trustee Meal - 2/27 -- $59.19
       Trustee Golf - 4/8 -- $36.00
       Trustee Room -6/25 - $82.00
       Trustee Golf - 6/24 - $38.00
       Trustee Meal – 6/24 -- $78.61
       Trustee Meal -- 8/11 -- $94.00
       Trustee Meal - 8/30 -- $96.00
       Trustee Meal – 11/04 -- $35.16
13.a.
       The Youngdahl Law Firm
       1414 Friendswood
       Friendswood, TX 77546
13.b.
       Employer
14.a/b.
       Gift (Steaks) -- 12/9 -- $83.69
13. a.
       Arkansas Carpenters Apprenticeship Fund
       1000 Burr Ridge Parkway,
              Suite 200
       Burr Ridge, IL 60527
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## 14.a./b.

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Trustee Hotel/Mileage - 8/24 -- \$169.04

13. a.

Marco Investments 300 Atlanta Financial Center 3343 Peachtree St., NE Atlanta, GA 30326

13.b.

Employer

14.a./b.

Trustee Golf – 2/24 -- \$38.17 Trustee Meal – 8/23 -- \$38.80 Trustee Meal – 12/13 -- \$44.34